



American Cancer Society  
Cancer Action Network  
555 11<sup>th</sup> Street, NW  
Suite 300  
Washington, DC 20004  
202.661.5700  
[www.acscan.org](http://www.acscan.org)

October 14, 2015

The Honorable Sylvia Mathews Burwell, Secretary  
U.S. Department of Health and Human Services  
200 Independence Avenue, S.W.  
Washington D.C., 20201

Dear Secretary Burwell,

The American Cancer Society Cancer Action Network (ACS CAN) appreciates the opportunity to comment on Montana's proposal to develop the Health and Economic Livelihood Partnership Program (HELP) through the Section 1115 Demonstration Waiver process. ACS CAN, the nonprofit, nonpartisan advocacy affiliate of the American Cancer Society, supports evidence-based policy and legislative solutions designed to eliminate cancer as a major health problem. As the nation's leading advocate for public policies that are helping to defeat cancer, ACS CAN ensures that cancer patients, survivors, and their families have a voice in public policy matters at all levels of government.

We strongly support expanded access to Medicaid and appreciate Montana's desire to pursue innovative approaches to the Medicaid program. Approximately 5,950 Montanans are expected to be diagnosed with cancer this year<sup>1</sup> and thousands more are cancer survivors – many of whom will need to rely on Medicaid for affordable health care coverage. Research has demonstrated that individuals who lack health insurance coverage are more likely to be diagnosed with advanced-stage cancer. Uninsured women are 4 times as likely to be diagnosed with advanced-stage breast cancer and 1.4 times as likely to be diagnosed with advanced stage cervical cancer.<sup>2</sup> Uninsured adolescents and young adults are at higher risk of advanced stage cancer diagnosis. Specifically, uninsured females aged 15 to 39 were nearly twice as likely as those with private insurance to be diagnosed with "distant stage" cancer.<sup>3</sup>

Our comments on the HELP proposal are intended to ensure that cancer patients and survivors in Montana will have adequate access and coverage under the program, and that specific requirements do not create barriers to care for low-income cancer patients.

### **Premium Contributions and Cost-Sharing**

We are concerned that, as written, Montana's proposal to implement a so-called "personal responsibility" approach to cost-sharing and premium contributions may place a greater financial burden on the lowest income Montanans and may create barriers to individuals and families – including

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<sup>1</sup> American Cancer Society, Cancer Facts and Figures 2015, available at <http://www.cancer.org/acs/groups/content/@editorial/documents/document/acspc-044552.pdf>.

<sup>2</sup> Ward, Elizabeth, et al., *Association of Insurance with Cancer Care Utilization and Outcomes*, 58 CANCER J. FOR CLINICIANS 9 (2008).

<sup>3</sup> Elizabeth Mendes, *For the Young and Uninsured, Cancer Diagnosis Often Comes Late* (Feb. 24, 2014), <http://www.cancer.org/research/acresearchupdates/more/for-the-young-and-uninsured-cancer-diagnosis-often-comes-late>

those with cancer – accessing needed health care. Under Montana’s proposal, adults under 138 percent of the Federal Poverty Level (FPL) would be required to pay monthly premiums equal to 2 percent of household income. Because this low income population is more likely to have inconsistent income throughout the calendar year **we recommend that monthly contributions be calculated based on the previous month’s income instead of the projected annual total household income. We also recommend that monthly copayment totals be limited to 3 percent of monthly household income (calculated based on previous month household income).**

### **Lock-out Periods**

We are deeply concerned about the proposed lock-out period for those over 100 percent of the FPL who do not make their monthly premium payments. The HELP program proposes a 6 month lock-out period for non-payment of premium contributions. During the 6-month lock-out period, low-income cancer patients will likely have no access to health insurance, making it difficult or impossible to continue treatment. For those cancer patients who are mid-treatment a loss of insurance would be detrimental to the success of their cancer treatments. **We strongly recommend removal of the 6-month lock-out period for HELP beneficiaries with income above 100 percent of the FPL who do not pay monthly premium contributions.**

### **Copayments**

We are also concerned about the level of copays required for those enrolled in the HELP program. For a patient with a serious, chronic condition such as cancer, copayments could quickly total 3 percent of income, which is a significant hardship for an individual or family fighting cancer. **We urge CMS to ensure that no HELP beneficiaries below 100 percent of the FPL will be turned away at the point of service for inability to pay a copayment.**

### **Health Incentive Program**

We also are concerned about the lack of information regarding the wellness program being proposed. Health-contingent wellness programs – if not well designed – potentially disadvantage cancer patients and others with chronic diseases due to physical circumstances beyond their control. **To the extent such health incentive programs are included in the final waiver, we strongly urge CMS to incorporate consumer protections similar to those described by the U.S. Department of Labor and Department of Health and Human Services (HHS) in the employer-based wellness program rules in any health incentive program.**

### **Eligibility**

We are pleased Montana proposes to implement a continuous 12 month eligibility standard. However, it is unclear whether Montana also will permit retroactive enrollment. We strongly urge CMS to require that Montana include this important protection.

We appreciate the opportunity to comment on the HELP Waiver Application. We look forward to working with CMS and the state of Montana to ensure that low-income Montanans have access to quality, affordable, comprehensive health insurance that best fits their needs. If you have any questions, please feel free to contact me or have your staff contact Anna Schwamlein Howard, Policy Principal, Access and Quality of Care at [Anna.Howard@cancer.org](mailto:Anna.Howard@cancer.org) or 202-585-3261.

Sincerely,

A handwritten signature in blue ink, appearing to read "Kirsten Sloan", is placed over a light yellow rectangular background.

Kirsten Sloan  
Senior Policy Director  
American Cancer Society Cancer Action Network